

219000144445

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

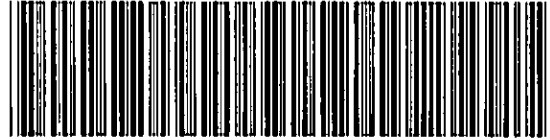
(Business Entity Name)

(Document Number)

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
22 MAY 13 PM 3:23

T. MATTHEWS

MAY 26 2022



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

2022 MAY 13 AM 7:54

SEC. OF STATE
TALLAHASSEE, FL

April 26, 2022

TROY WATTS
3043 OAK POINTE DR
PENSACOLA, FL 32505

SUBJECT: KNO3 INNOVATIVE DESIGNS, LLC
Ref. Number: L19000144445

We have received your document for KNO3 INNOVATIVE DESIGNS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA PROFIT CORP, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tekayla T Matthews
OPS

Letter Number: 322A00009710

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: KNO3 Innovative Designs, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Troy Watts

Name of Person

KNO3 Innovative Designs, LLC

Firm/Company

3043 Oak Pointe Drive

Address

Pensacola FL, 32505

City/State and Zip Code

t_w_kno3id@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Troy Watts

312 590-8518
at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

22 MAY 13 PH 3: 24

KNO3 Innovative Designs, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on May 30, 2019 and assigned
Florida document number 11900014445.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Troy Watts

New Registered Office Address:

3043 Oak Point Dr

Enter Florida street address

Pensacola

City

Florida 32505

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.



If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
VP	Michelle Jones	1410 N 65th AVE	<input type="checkbox"/> Add
		Pensacola FL, 32506	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
TRES	Kassandra Cotto	19a Pen Haven Drive	<input type="checkbox"/> Add
		Pensacola FL, 32506	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
VP	Troy Watts	3043 Ok Pointe Drive	<input type="checkbox"/> Add
		Pensacola FL, 32505	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
Secretary	Sandra Morris	7309 Arctic Circle	<input checked="" type="checkbox"/> Add
		Corpus Christi, TX 78414	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
	Nestor Taylor		<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated May 10, 2022

Troy Watts

Typed or printed name of signee